SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 53

FOR LINE NUMBER: (check only one)

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13   [ ] 14   [ ] 15   [ ] 16   [ ] 17

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NAME OF COMMITTEE (In Full)

American Optometric Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr Tracie M King

Mailing Address 1323 South Hanover St

City	State	Zip Code
Baltimore	MD	21230-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self Employed

Occupation
Doctor of Optometry

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2006

Transaction ID: 24441259

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr Norma Jean Levingston

Mailing Address 1364 Weston Ridge Road

City	State	Zip Code
Scotts Valley	CA	95066-2524

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self Employed

Occupation
Doctor of Optometry

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2006

Transaction ID: 24441264

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr Morgan Brent Moore

Mailing Address 1520 Chaparral

City	State	Zip Code
Burkburnett	TX	76354

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self Employed

Occupation
Doctor of Optometry

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2006

Transaction ID: 24441268

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) .... ▶   850.00

TOTAL This Period (last page this line number only) .... ▶

FEC Schedule A (Form 3X) Rev. 02/2003